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PTO/SB/21 (09-04)

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TRANSMITTAL
FORM

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Total Number of Pages in This Submission

17

Application Number

10/708,530

Filing Date

10 March 2004

First Named Inventor

Ramachandra Divakaruni

Art Unit

2818

Examiner Name

Phuc T. Dang

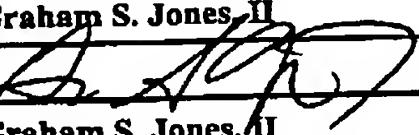
Attorney Docket Number

FIS920030421US1

ENCLOSURES (Check all that apply)

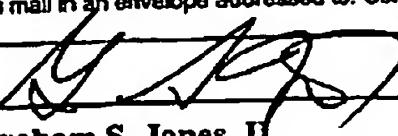
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Graham S. Jones, II		
Signature			
Printed name	Graham S. Jones, II		
Date	25 October 2005	Reg. No.	20,429

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Graham S. Jones, II		
	Date	25 October 2005	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

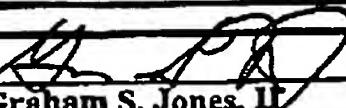
Approved for use through 07/31/2006. OMB 0651-0032
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete If Known	
Fee TRANSMITTAL For FY 2005		Application Number	10708,530
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	10 March 2004
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Ramachandra Divakaruni
0		Examiner Name	Phuc T. Dang
		Art Unit	2818
		Attorney Docket No.	FIS920030421US1

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>09-0458</u> Deposit Account Name: <u>International Business Machines Corporation</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES							
Application Type	Fee (\$)	Small Entity	SEARCH FEES	Small Entity	EXAMINATION FEES		
Utility	300	150	500	250	200	100	_____ _____ _____
Design	200	100	100	50	130	65	_____ _____ _____
Plant	200	100	300	150	160	80	_____ _____ _____
Reissue	300	150	500	250	600	300	_____ _____ _____
Provisional	200	100	0	0	0	0	_____ _____ _____
2. EXCESS CLAIM FEES						Small Entity	
Fee Description						Fee (\$)	
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						100	
Multiple dependent claims						360	
Total Claims						Small Entity	
20 - 20 or HP = <u>0</u> x _____ = _____						25	
HP = highest number of total claims paid for, if greater than 20						_____ _____ _____	
Indep. Claims						Small Entity	
3 - 3 or HP = <u>0</u> x _____ = _____						100	
HP = highest number of independent claims paid for, if greater than 3						_____ _____ _____	
3. APPLICATION SIZE FEE						Small Entity	
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						25	
Total Sheets						Small Entity	
- 100 = <u>150</u> / 50 = _____ (round up to a whole number) x _____ = _____						125	
4. OTHER FEE(S)						Small Entity	
Non-English Specification, \$130 fee (no small entity discount)						130	
Other: _____						_____	

SUBMITTED BY		Registration No.		Telephone	
Signature			(Attorney/Agent)	(845) 473-9118	
Name (Print/Type)	Graham S. Jones, II				
Date					
25 October 2005					

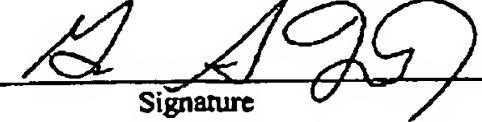
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25 October 2005

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 Name of Person Making Deposit

 Signature

25 October 2005
 Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors:	Ramachandra Divakaruni et al.	Date:	25 October 2005
Serial No.:	10/708,530	Art Unit:	2818
Filing Date:	10 March 2004	Examiner:	Phuc T. Dang
Confirmation No.	2529	Docket No.:	FIS920030421US1
Title:	Method for Manufacturing Tungsten/Polysilicon Word Line Structure in Vertical DRAM and Device Manufactured Thereby	Attorney:	Graham S. Jones, II 42 Barnard Avenue Poughkeepsie, NY 12603-5023

AMENDMENT

The Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Your Honor:

In response to the Office Action of 25 July 2005, please amend the above-identified application as follows:

Amendments to the Title	begin on page 2 of this paper.
Amendments to the Specification	begin on page 3 of this paper
Amendments to the Abstract	begin on page 5 of this paper
Amendments to the Claims	begin on page 6 of this paper.
Remarks/Arguments	begin on page 11 of this paper.

FIS920030421US1

- 1 -

Serial No.:	10/718,530	Art Unit:	2818
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IN THE TITLE

Please amend the title to read as follows:

~~-- Method for Manufacturing Tungsten/Polysilicon Word Line Structure in Vertical DRAM
and Device Manufactured Thereby --~~

FIS920030421US1

- 2 -